



Form CPF 18A : Report of Independent Expenditure  
Promoting Election or Defeat of Candidate(s)

Office of Campaign and Political Finance

Commonwealth  
of Massachusetts

Office of Campaign and Political Finance  
One Ashburton Place  
Boston, MA 02108  
(617) 727-8352

Oct 31 2006

1. Date of Report:

(Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate)

2. Expenditure(s) Made By:

Massachusetts Nurses Association  
(Name of individual or group making expenditure)

340 Turnpike St.,  
Street Address

Canton  
City/Town

02021  
Zip

3. Name of Candidate(s) For Whom the Above Expenditure(s) Election or Defeat Promoted:

Cleon Turner / State Rep.

4. Expenditure(s):

Date Paid	To Whom Paid	Address	Purpose	Amount
10/30/06	Cape Cod Times	319 Main St Hyannis 02601	print ad	1116.48
10/27/06	Saltus Press	24 Jolma St. Worcester 01604	Mailing	170.81

I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c.55, section 18A:

- (1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any contributions in contemplation of such expenditure(s); and
- (2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, consult or act in concert with or at the request or suggestion of any candidate, or political committee organized on behalf of any candidate, or any agent of a candidate or any political committee in making such expenditure(s).

I further certify that all statements made herein are true and accurate.

Signed under the penalties of perjury:

Katrina Anderson 10/30/06  
Signature Date

Katrina Anderson  
Director, Legislation and Government Affairs

Print Name of Individual Signer and Title (if signing on behalf of a group)

CAMPAIGN & POLITICAL  
FINANCE

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